

PUTNAM COUNTY EMERGENCY MEDICAL SERVICES

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Explanation of Attached Cardiac Arrest Statistics

Attached is the cardiac arrest statistics for the 2002-03 fiscal year. The statistics are broken down into three regions:

- Entire county including all rural areas and all cities,
- Cookeville
- Rural areas including three smaller cities and all unincorporated areas.

The data was analyzed using the Utstein Style Uniform Reporting of Data From Out of Hospital Cardiac Arrest Assessment Tool.

- Published in 1991 in Europe and is
- Endorsed by the American Heart Association and
- Widely recognized as the standard to measure cardiac resuscitation success both here and abroad.

The Utstein Tool starts with the total number of cardiac arrests then eliminates “non-survivable arrests”. To be considered a potentially “survivable” cardiac arrest, the following parameters must be satisfied:

- Event must be of cardiac etiology
- Witnessed arrest;
- Ventricular Fibrillation.

The Utstein Tool assess four major areas:

- Return of Circulation, does the patient regain a pulse?
- Admitted to the hospital.
- Was the patient discharged alive from the hospital alive?
- Is the patient still alive 1 year after the event?

We assessed two of these areas, return of circulation and discharge from the hospital. Return of circulation was determined if the patient regained a pulse during the resuscitation efforts. To qualify as “Discharged Alive”, the patient must return to the community in a normal or near normal state. Patients that were discharged with a poor neurological outcome or severely debilitated would have been counted as a non-survivor. No patient was excluded on these bases. Two patients survived a number of days in the hospital but died before discharge.

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Of the six people that survived to hospital discharge:

- 3 were shocked in less than 1.5 minutes
- One arrested in the ambulance during treatment for chest pain.
- One received pre-arrival bystander CPR and was shocked in just less than 10 minutes.
- The remaining arrest received pre-arrival CPR and was shocked in less than 8.5 minutes.

Steps have already been taken in the community to improve survival. How can we sustain and improve the survival rate?

- Additional AEDs on Sheriff's car, County Fire trucks, Police cars or even public works vehicles
- Rapid, broad notification of responders with AED of cardiac arrest events
- AED in every county building and city building
- Encourage purchases by private organizations
 - businesses
 - churches
 - civic groups
 - communities and neighborhoods
 - recreational facilities
 - fitness centers

We would like to support and encourage this by providing:

- Free initial CPR/AED training to groups, businesses and individuals that purchase the devices.
- Public relations campaign to support this program.
- Sticker or other signage to the business that purchased AEDs. This would be a visual indication to patrons of a business that their well fair is important to the establishment and might inspire some friendly competition between the local businesses to purchase the devices.

Implementation of these measures will require time and effort but the success of the program is measured in lives. It is a worthwhile commitment for the county, the city and the emergency services agencies.